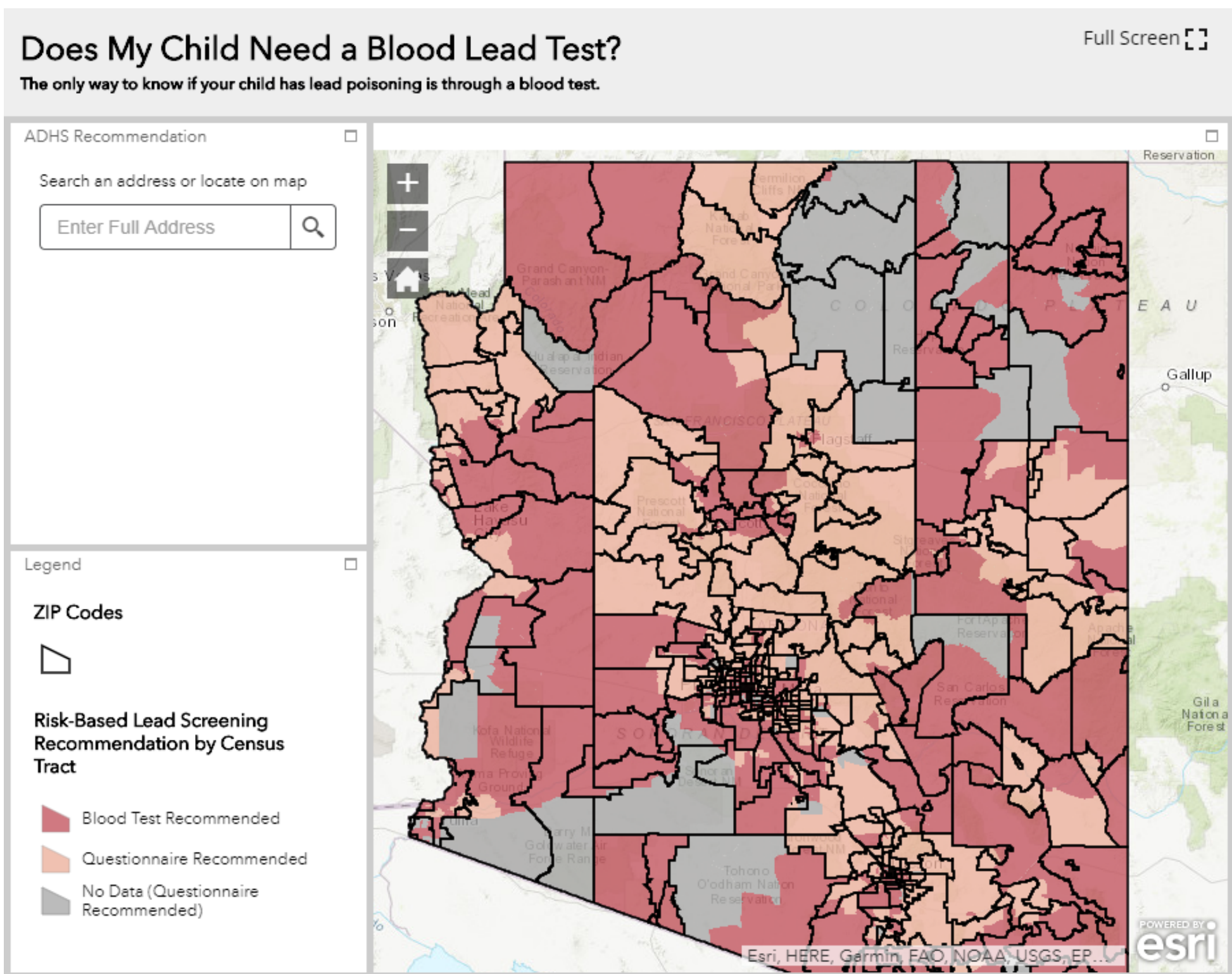


Childhood Lead Screening and Clinical Management Recommendations




- 1. Evaluate **all** children for their risk of lead poisoning at **12** and **24** months of age.
- 2. Determine if a child lives in a high-risk neighborhood at www.azdhs.gov/leadmap or use the list of high-risk zip codes.*




*If you are unable to use lead risk map visit www.azhealth.gov/leadzipcodes to download the list of high-risk zip codes. A PO Box address may be used if physical address is unknown or unavailable.

- 3a. **Order a blood lead test** if the child lives in a high-risk neighborhood.
- 3b. **Complete questionnaire** with parent if child does not live in a high-risk neighborhood. Order a blood test if the child is found to be at risk. www.azhealth.gov/leadquestions


Common Sources of Lead in Arizona




Homes built before 1978 with chipping, peeling or flaking paint, or imported toys with lead-based paint.



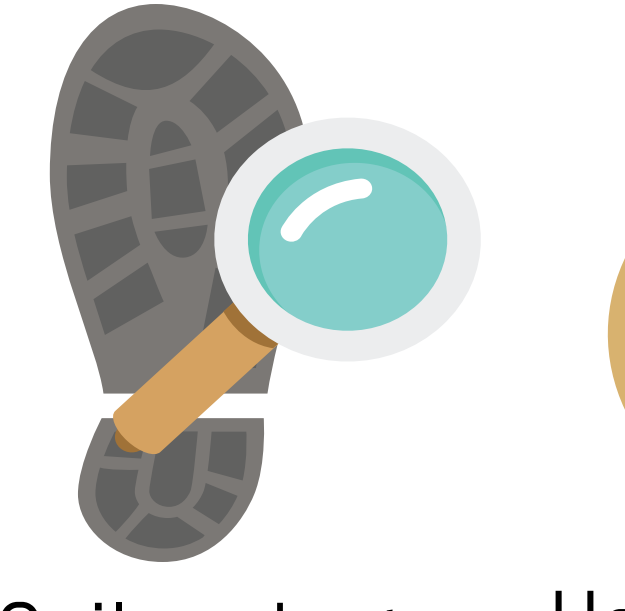
Imported spices, such as turmeric, coriander, black pepper, thyme, and hanuman sindoor.




Imported glazed pottery, commonly used to cook beans or hot chocolate.



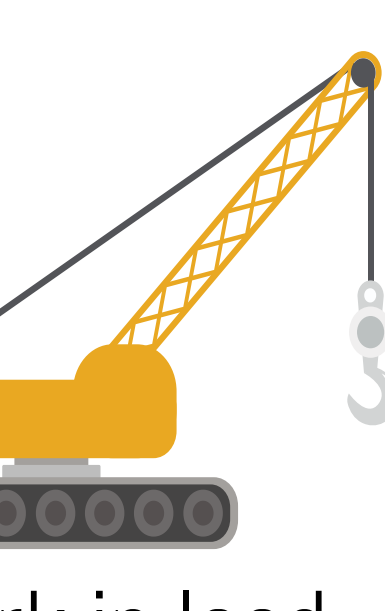
Home remedies such as *greta* or *azarcon* used to treat stomach illness or *empacho*.



Soil or dust tracked into the house contaminated with lead.



Hobbies such as hunting and fishing that use leaded bullets or fish sinkers; some artist paints and furniture refinishing.



Work in lead-related industries such as construction, mining, welding, or plumbing.

Clinical Management for Children Based on Confirmed Blood Lead Levels

**Adapted from CDC and AAP Guidance*

Blood Lead Levels (µg/dL)	Follow-Up Care
<3.5	<ul style="list-style-type: none">Assessment of nutritional and developmental milestonesBlood lead testing at recommended intervals based on child’s age according to ADHS Targeted Screening Plan http://azhealth.gov/leadscreeningplanProvide lead poisoning information to parents http://azhealth.gov/leadmaterials for printable materials
3.5–9	<ul style="list-style-type: none">Assessment of developmental milestonesNutritional counseling related to calcium, iron intake, and Vitamin CDiscuss possible sources of lead (<i>see front for common sources</i>)Follow-up venous blood lead monitoring according to Table A belowAZ CLPPP Support: Send informational letter and health education materials
10–19	<ul style="list-style-type: none">Assessment of developmental milestonesNutritional counseling related to calcium, iron intake, and Vitamin CFollow-up venous blood lead monitoring according to Table A belowAZ CLPPP Support: Send informational letter and health education materials, conduct phone call to determine lead exposure source
20–44	<ul style="list-style-type: none">Complete history and physical examNeurodevelopmental assessmentLab work: Rule out iron deficiency & prescribe iron if neededConsider abdominal X-ray (with bowel decontamination if indicated)Follow-up venous blood lead monitoring according to Table A belowAZ CLPPP Support: Send informational letter and health education materials, conduct phone call to determine lead exposure source, offer home investigation
45–69	<ul style="list-style-type: none">Complete history and physical examComplete neurological exam including neuro-developmental assessmentLab work: Rule out iron deficiency & prescribe iron if neededConsider abdominal X-ray (with bowel decontamination if indicated)Chelation therapy considered, contact poison control [(800) 222-1222] for guidanceFollow-up venous blood lead monitoring according to Table A belowAZ CLPPP Support: Send informational letter and health education materials, conduct phone call to determine lead exposure source, offer home investigation
≥70	<ul style="list-style-type: none">Confirm venous blood lead level immediately in addition to all the test and assessments as indicated aboveContact poison control [(800) 222-1222] for chelation therapy in conjunction with consultation with a medical toxicologist or a pediatric environmental health specialty unit [Western States (415) 206-408]Proceed with additional interventions for BLLs between 45-69 µg/dLAZ CLPPP Support: Send informational letter and health education materials, conduct phone call to determine lead exposure source, offer home investigation

Table A: Repeat Testing Schedule for Elevated Results

Venous blood lead level (µg/dL)	Early follow-up (first 2-4 tests after)	Late follow-up (after blood lead begins to decline)	<div>*Some health care providers may choose to repeat blood lead tests on all new patients within a month to ensure that their blood lead level is not rising more quickly than anticipated.</div>
3.5-9	3 months*	6-9 months	
10-19	1-3 months*	3-6 months	
20-44	2 weeks-1 month	1-3 months	
≥45	As soon as possible	As soon as possible	

Table B: Schedule for Confirmatory Venous for Elevated Capillary

Capillary blood lead level (µg/dL)	Perform a confirmatory venous draw within	<div>*The higher the BLL on the screening test, the more urgent the need for confirmatory testing.</div>
3.5-9	1 - 3 months*	
10-19	1 week- 1 month*	
20-44	Within 2 weeks*	
≥45	Within 48 hours*	

For more information contact the Childhood Lead Poisoning Prevention Program at the Arizona Department of Health Services (**AZCLPPP**) at 602-364-3118.

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